

## Section A: Primary Information

- ## Section A: Primary Information

7. **Project Description:** Please provide a narrative describing your project. Describe: WHAT you will do, WHO you will serve, WHY the project is needed, WHERE you will do it, and WHAT you will fund with CDBG funds?
8. **Project Need:** What unmet community need (s) will your project address, how did you determine that this need(s) exists, and how will your project address this need(s)?
9. **Self Sufficiency:** How will your project foster self-sufficiency of the client population served? Describe any factors that make your proposal unique or innovative:
10. **Location of Project:** Please provide the actual address(es) where your staff implementing this project will be physically located. Also please describe the primary service area(s) for this project; that is, the geographic area from which most clients will come (e.g. by street, neighborhoods, communities, or census tracts). If the service area is Citywide, please state that, but if beneficiaries tend to come from certain neighborhoods, areas or parts of the City, please identify those areas.
11. **Project Goal:** Please explain and list your project goals.
12. **Beneficiaries:**
  - Estimate the total number (unduplicated) of people who will directly benefit from this project.
  - Estimate the total number (unduplicated) of low –and moderate – income people who will directly benefit from this project.
  - What percentage of the total people served is expected to be of low-and moderate – income?
  - What is the estimated number of minority people/households to be served by this project?
  - Please identify any racial or ethnic minority groups targeted for services.
13. **Organization Experience and Capacity:** please explain your organizations experience and capacity for the project.

14. **Community Development (Collaboration):** Will you enter into partnership with any other organization(s) to undertake this project? Yes      No      if “yes” please list the organization(s) and its contribution(s).

Is this proposed project coordinated with or a part of any ongoing housing or community development program?    Yes                      No                      If “yes”, explain how:

15. **Budget:** Please supply a Budget for the project for which you are requesting funds (Revenue Sources and Expenditures).
16. **Timing:** Any CDBG funds awarded must be fully expended within 12-month period from the date of the contract signing. Please indicate how the activities will be undertaken and funds sent to meet this time frame requirement.
17. **Leveraging:** Please explain any leveraging this project will include.
18. **Marketing and Outreach:** Please describe how you will outreach and market your program.

**Please attach the following information to this application:**

- List of Board of Directors
- Mission of Agency/Organization
- Any supporting information as necessary.

---

Signature of Applicant/Agency Representative

---

Date

# **EXHIBIT 1** **2016 INCOME LIMITS**

U.S. DEPARTMENT OF HUD 04/13/2016  
STATE: WISCONSIN

PROGRAM	----- 2016 ADJUSTED HOME INCOME LIMITS -----							
	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PERSON	8 PERSON
Green Bay, WI HUD Metro FMR Area								
30% LIMITS	14000	16000	18000	20000	21600	23200	24800	26400
VERY LOW INCOME	23350	26650	30000	33300	36000	38650	41300	44000
60% LIMITS	28020	31980	36000	39960	43200	46380	49560	52800
LOW INCOME	37350	42650	48000	53300	57600	61850	66100	70400

